

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 235228	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/27/2024
NAME OF PROVIDER OR SUPPLIER Cherry Hill for Nursing and Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 38410 Cherry Hill Rd Westland, MI 48185	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46956</p> <p>This citation pertains to Intakes M100144781 and M100145103.</p> <p>Based on observation, interview, and record review, the facility failed to maintain a clean, comfortable, homelike environment for four (R701 and R703) of four residents reviewed for homelike environment. Findings include:</p> <p>R701</p> <p>On 06/27/24 at 10:25 AM, R701 was observed lying in bed in their room watching television. R701 stated, The shower room is so nasty; I wouldn't dare walk in there barefoot. Its just nasty and it's not fair.</p> <p>On 6/27/24 at 11:30 AM, an observation was made of the shower room on 2 hall. Upon entering the area a dried brown stain was noted on the floor outside of door and trailing inside the room. A pile of feces was noted in the shower room drain. Trash and debris was noted in the corners of the room.</p> <p>A record review revealed that R701 was admitted on [DATE] with the following medical diagnoses of Morbid Obesity, Bipolar Disorder, Raynaud's syndrome with Gangrene. A review of the most recent Minimum Data Set assessment dated [DATE] was completed with a Brief Interview for Mental Status (BIMS) score of 15 which indicates intact cognition.</p> <p>06/27/24 at 1:30 PM, a tour of the shower rooms and an interview with the Director of Nursing (DON) revealed, The shower room is cleaned daily at several times.</p> <p>R703</p> <p>Review of the facility record for R703 revealed an original admitted [DATE] with diagnoses including cerebral infarction with right hemiplegia. The Brief Interview for Mental Status (BIMS) assessment dated [DATE] was scored 15/15 indicating intact cognitive function.</p> <p>On 06/27/24 at 10:40 AM, a strong odor of urine was noted in the area of room [ROOM NUMBER] where R703 resides. R703 was interviewed and expressed no general care concerns. The odor of urine remained strong while in the residents room.</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 06/27/24 at 11:51 AM, the odor of urine remained strongly present near and inside the room of R703.</p> <p>On 06/27/24 at 2:30 PM, Certified Nurse Assistant (CNA) A reported they were the current CNA for R703. CNA A reported both residents require brief changes as both are generally incontinent and not able to be assisted to use the toilet. CNA A acknowledged the odor of urine near room [ROOM NUMBER] and indicated they thought it may have been coming from across the hall as a large puddle of liquid was observed on the floor in the room across from 221.</p> <p>On 06/27/24 at 2:35 PM, the facility Director of Nursing (DON) was interviewed at room [ROOM NUMBER] regarding the urine odor and they reported that sometimes residents lay in bed and urinates on the floor and we have it care-planned.</p> <p>On 06/27/24 at 3:11 PM, R703 was interviewed in their room where the odor of urine remained strong despite the puddle of liquid in the room across the hall having been cleaned. R703 was asked about the odor of urine noted in their room over the course of the day and stated Yeah, I notice it. Everyone who comes in here does. When asked if the odor bothers them R703 stated Yes, it does.</p> <p>On 06/27/24 at 3:30 PM, the DON was asked their expectation regarding residents living in a room with a persistent odor of urine. The DON indicated they expect any related housekeeping and patient care protocols to be followed in order to attempt to control the issue.</p> <p>On 06/27/24 at 3:39 PM, the facility Administrator (NHA) reported that their expectation regarding cleanliness in the facility is that housekeeping and cleanliness protocols be followed.</p> <p>Review of the facility policy Quality of Life-Homelike Environment dated 05/17 revealed the policy statement Residents are provided with a safe, clean, comfortable, and homelike environment . The Policy Interpretation and Implementation portion includes the following entries:</p> <ul style="list-style-type: none"> - The facility staff and management shall maximize, to the extent possible, the characteristics of the facility that reflect a personalized, homelike setting. The characteristics include: <ul style="list-style-type: none"> a. Clean, sanitary, and orderly environment; f. Pleasant, neutral scents; - The facility staff and management shall minimize, to the extent possible, the characteristics of the facility that reflect a depersonalized, institutional setting. These characteristics include: <ul style="list-style-type: none"> b. Institutional odors. 		